



PLUMBING APPLICATION

CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling <input type="checkbox"/> Commercial/industrial <input type="checkbox"/> Multi-family	
JOB SITE INFORMATION AND LOCATION	
Job address:	
Suite/bldg./apt. no.:	
City/State/ZIP:	
Tenant/Business:	
Project/Owner:	
DESCRIPTION OF WORK	
PROPERTY OWNER	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CCB lic. no.:	BCD lic. no.:
Contact name:	
Contact Phone: ()	
PERMIT DELIVERY – CONTRACTORS ONLY	
Deliver my permit via: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> E-mail Be sure the address, fax number, or e-mail is listed above. All receipts sent via mail.	
PLAN REVIEW REQUIRED IF ANY OF THE FOLLOWING APPLY	
Please check all that apply***:	
<input type="checkbox"/> Installation or alteration of medical gas and vacuum systems for health care facilities <input type="checkbox"/> Installation or alteration of chemical drainage waste and venting systems containing chemical agents potentially detrimental to the plumbing system <input type="checkbox"/> Installation or alteration of wastewater pretreatment systems for building sewers <input type="checkbox"/> Installation of vacuum drainage waste and venting <input type="checkbox"/> Installation or alteration of reclaimed wastewater systems	<input type="checkbox"/> Installation of commercial booster pump system needed to maintain a minimum residual water pressure in a structure supplied by a municipality <input type="checkbox"/> Installation of a plumbing system requiring a building water service line with an interior diameter or nominal pipe size of 2" or greater except 2" line systems designed and stamped by a licensed engineer <input type="checkbox"/> Installation of any multi-purpose fire sprinkler system under standards adopted by the department <input type="checkbox"/> Grease processing equipment (traps, interceptors)
PERMIT NUMBER	

FEE SCHEDULE			
Description	Qty.	Cost ea.	Total
NEW RESIDENTIAL ONLY			
1 Bathroom / 1 Kitchen**		\$ 479.60	
2 Bathrooms / 1 Kitchen**		\$ 643.10	
3 Bathrooms / 1 Kitchen**		\$ 719.40	
Each additional bathroom (over 3)		\$ 191.84	
Each additional kitchen (over 1)		\$ 191.84	
RESIDENTIAL, COMMERCIAL/INDUSTRIAL, & MULTI-FAMILY PROJECTS			
Each fixture, appurtenance, and piping.		*\$ 21.80	
Sanitary and Storm Service			
First 100 feet		\$ 134.07	
Each additional 100 feet or fraction thereof		\$58.86	
Water Service			
First 100 feet		\$106.82	
Each additional 100 feet or fraction thereof		\$58.86	
Backflow Device		*\$ 21.80	
Residential Water Heater replacement combo (minimum plumbing fee not applicable.)		\$ 65.00	
MEDICAL GAS			
Valuation of installation and equipment for the medical gas system:			
Permit fee			
This fee will be calculated using the current City of Eugene building permit fee table, plus a 9% City Administration fee.*			
PLUMBING PERMIT FEES			
Subtotal permit fees			
A (Enter the greater of the subtotal or minimum permit fee \$87.20*):			
B State surcharge (12% of subtotal line A):			
Plan review***			
C (35% of subtotal line A, plus 9% City Administration fee.):			
TOTAL PERMIT FEE			

*Note: The minimum fee for issuing a plumbing permit is \$87.20 (this is the minimum fee of \$80.00 plus the 9% City Administration fee). This is only applicable when plumbing fees do not total \$87.20. Example: Permit for backflow device would be \$21.86; however, due to the minimum fee the actual charge would be \$87.20.

**Note: This bathroom / kitchen includes First 100 feet of water/sewer lines, hose bibs, ice maker, under-floor low point drains and rain drain packages.

***If a plan review is required, a 35% plan check fee will be charged on the permit fees and then the 9% City Administration fee will be added to that total.

SDC fees may also apply. Contact Public Works Engineering at (541) 682-8400 for more information.

www.eugene-or.gov/bps